STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s) William McQuillen	
II. Name of lobbyist's partnership, firm or corporation, if any:	
The Professional Fire Fighter of N (Name of partnership, firm or corporation)	ow Hampshire
Business Address: (Street) Concord N (Town/City)	H 03301 (State) (Zip Code)
(103) <u>113-3304</u> (103) (103) (Fax)	e-mail wmquillen@pffnh.org
III. This statement covers: (Choose one – file separate reports for reportable expense transactions which are not attributable to a	
All reportable transactions occurring in the months prior to the	reporting date relative to the following client:
The Professional Five Fanters of M (Full Name of Client as it appears on the Lobby OR	Jew Hampshire ist Registration Form
☐ All reportable transactions by the lobbyist (including the lobbyi unrelated to any particular client.	st's family), or the lobbying firm listed below which are
IV. Date of Report April 25, 2018 Reports cover: activity from date of registration to 3/31/18	July 25, 2018
October 31, 2018 \square activity from 7/1/18 to 9/30/18	January 30, 2019 activity from 10/1/18 to 12/31/18
V. There have been no fees received and no reportable training this box is checked, complete just this form and submit it to the S Concord, NH 03301.	ansactions made since the last report. — ecretary of State's Office, State House, Room 204,
VI. Check if additional reports are attached:	
If you have received fees or made expenditures, you must file	
☐ If you have paid an honorarium or reimbursed expenses, you n Expense Reimbursement	lust file Addendum B— Report of Honorariums or
\square If you, your firm, or your family has made political contribution	ns, you must file Addendum C- Political Contributions
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and herel and complete to the best of my knowledge and belief.	4/25/18
(Signature of lobbyist)	RECEIVED
WILLIAM J Mc OULLEN (Print Name of lobbyist)	,
(APR 2 5 2018
	NEW HAMPSHIRE DEPARTMENT OF STATE

STATE OF NEW HAMPSHIRE

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Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) William McQuiUn	
II. Name of lobbyist's partnership, firm or corporation, if any:	
The Professional Fire Figures of New (Name of partnership, firm or corporation)	Hampshire
III. Name of Client	Date
 IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, governmen including research, monitoring legislation, and related legal work. The gr reduced by any expenses: a) Total of all fees received in this reporting period b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year) 	t relations, or public relations services oss fee amount reported shall not be a) \$ \frac{3085.16}{b}\$
c) Total of all fees received to date (Add lines a and b)	c)\$3,085.16
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ Ø
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office expenses where the expenditure was of \$25.00 or less (for examplunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this repeany purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value great restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm e aggregate total of all expenses paid xpenses; (b) the aggregate total of all ele: meals purchased during a business ess than \$10 that is given to the personed with a value of \$25.00 or less); and orting period of greater than \$25.00 fo ue of greater than \$25, purchase of a er than \$25, but not greater than \$50 s, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
6	
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	m that the foregoing information
(Signature of lobbyist)	4/25/18 (Date)
WILLIAM J Mc OVILLEN (Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying part	nership, firm, or corpo	oration: The Profession	al Fire Eighten of NH
			corporation and not related to an
particular client):			
Date of Report (check o	one):		
April 25, 2018 🗹	July 25, 2018 □	October 31, 2018 □	January 30, 2019 □
			nd Expenses described above, and umber of Addendum forms being
Addendum A(s)).		
Addendum B(s)).		
Addendum C(s)).		
I hereby swear or affirm complete to the best of a			nt and each Addendum is true and
(Signature of loobyist)		4/2	5 18 (Date)
Malliam.) M	cô viuen		
(Print Name of lobbyist	•		